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PTO/SB/05 (03-01)

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UTILITY PATENT APPLICATION TRANSMITTAL

Please type a plus sign (+) inside this box

Attorney Docket No. P895 US

First Inventor Todd Campbell

Title Stent Assembly with Therapeutic Agent Exterior Banding

EV005741738 US Express Mail Label No. (Only for new nonprovisional applications under 37 CFR 1.53(b)) Assistant Commissioner for Patents **APPLICATION ELEMENTS** ADDRESS TO: **Box Patent Application** See MPEP chapter 600 concerning utility patent application contents. Washington, DC 20231 Fee Transmittal Form (e.g., PTO/SB/17) CD-ROM or CD-R in duplicate, large table or it an original and a duplicate for fee p Computer Program (Appendix) Applicant claims small entity status. 8. Nucleotide and/or Amino Acid Sequence Submission See 37 CFR 1.27. (if applicable, all necessary) Specification (Total Pages 3. [X Computer Readable Form (CRF) - Descriptive title of the invention b. Specification Sequence Listing on: - Cross Reference to Related Applications i. CD-ROM or CD-R (2 copies); or - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix Background of the Invention Statements verifying identity of above copies - Brief Summary of the Invention ACCOMPANYING APPLICATION PARTS - Brief Description of the Drawings (if filed) - Detailed Description Assignment Papers (cover sheet & document(s)) - Claim(s) 37 CFR 3.73(b) Statement Power of - Abstract of the Disclosure 10 (when there is an assignee) Attorney English Translation Document (if applicable) 11. 4. X Drawing(s) (35 U.S. C. 113) [Total Sheets Information Disclosure Copies of IDS 12 5. Oath or Declaration [Total Pages Citations Statement (IDS)/PTO-1449 Preliminary Amendment Newly executed (original or copy)
Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 18 completed) 13 Return Receipt Postcard (MPEP 503) (Should be specifically itemized) Certified Copy of Priority Document(s) (if foreign phority is claimed) **DELETION OF INVENTOR(S)** Signed statement attached deleting inventor(s) Nonpublication Request under 35 U.S.C. 122 named in the prior application, see 37 CFR (b)(2)(B)(i). Applicant must attach form PTO/SB/35 1.63(d)(2) and 1.33(b). or its equivalent. Application Data Sheet. See 37 CFR 1.76 Other 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1. 76: Divisional of prior application No. Group Art Unit: Examiner For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS X Correspondence address below Customer Number or Bar Code Label Name <u>Address</u> Zip Code City DEMARK OFFICE Te le phone Fax Country Registration No. (Attorney/Agent) 34,472 Michael J. Jaro Name (Print/Type) Mill Date January 22, 2002

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

PTO/SB/17 (11-01)

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

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C	Complete if Known Application Number					
Application Number						
Filing Date						
First Named Inventor	Todd Campbell					
Examiner Name						
Group Art Unit	,					
Attorney Docket No.	P895 US					

	METH	OD OF PAY	MENT (check all that	apply)				F	EE CALCULATION (continued)	
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Ē., ş	Name '	Medtronic			127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
			zed to: (check all that a		139	130	139	130	Non-English specification	
	_	(s) indicated bel	ow X Credit any or control of the pendency of		147	2,520	147	2,520	For filing a request for ex parte reexamination	
U	Ħ	•	ow, except for the filing		112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
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		FEE C	ALCULATION		445	440	24.5	EE	Examiner action Extension for reply within first month	
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Ξ	Code (\$)	Code (\$)		Fee Paid		1,440	218		Extension for reply within fourth month	
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T.	114 160	214 80	Provisional filing fee		121	280	221		Request for oral hearing	
	114 100	l			138	1,510	138	1,510	Petition to institute a public use proceeding	
Ī.		S	SUBTOTAL (1) (\$)	740.00	140	110	240	55	Petition to revive - unavoidable	
	2. EXTRA C	CLAIM FEES	FOR UTILITY AN		141	1,280	241	640	Petition to revive - unintentional	
			Fee from Extra Claims below	Fee Paid	142	1,280	242	640	Utility issue fee (or reissue)	
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	1 ann - F-414 . (123	50	123	50	Processing fee under 37 CFR 1.17(q)	
	Large Entity Fee Fee	Small Entity Fee Fee	Fee Description		126	180	126	180	Submission of Information Disclosure Stmt	
ł	Code (\$) 103 18	Code (\$) 203 9	Claims in excess of 20)	581	40	581	40	Recording each patent assignment per property (times number of properties)	
- 1	102 84	202 42	Independent claims in	excess of 3	146	740	246	370	Filing a submission after final rejection	
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	110 18	210 9	** Reissue claims in e		179	740	279	370	Request for Continued Examination (RCE)	
			and over original par	ent	169	900	169	900	Request for expedited examination of a design application	
		SUB	TOTAL (2) (\$)	234.00	Other	r fee (s	pecify)		
	**or number		, if greater; For Reissues		*Red	uced b	y Bas	ic Filing	Fee Paid SUBTOTAL (3)	

SUBMITTED BY				Complete (if applicable)		
Name (Print/Type)	Michael J. Jaro	Registration No. (Attorney/Agent)	34,472	Telephone	707-566-1746	
Signature	Mary 1.1-			Date	12/02	

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